

## Vehicle/Vessel Contract Application

Use this form to apply for access to vehicle/vessel records through the Internet Vehicle/Vessel Information Processing System (IVIPS) or to receive bulk/batch data. Send the completed form with a copy of your business license and other required documents by fax to: **(360) 570-7895** or email (print and scan or upgrade to **Adobe Reader XI** or above) to: **vsdisclose@dol.wa.gov**.

Please allow 14 business days to process and respond to your request. Questions or assistance: IVIPS: (360) 359-4001; Bulk/batch: (360) 902-0136.

We are committed to protecting personal information and there is no guarantee you will be approved. We release records only as allowed by state and federal laws, including the Driver Privacy Protection Act (DPPA). The DPPA also restricts redisclosure of personal information you receive.

### Fees

**IVIPS contract fees:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee.

**Bulk records contract fees:** There is a 1-cent fee per unique VIN record. The contractor is also responsible to pay a onetime set-up fee and monthly maintenance fee. Setup and maintenance fees may vary for bulk records.

<b>1</b> Method of access you are requesting <input checked="" type="checkbox"/> <b>IVIPS (Individual record inquiries)</b> Current IVIPS number, if applicable _____ <input type="checkbox"/> Bulk vehicle/vessel records ( <i>Batch process</i> ) Frequency ( <i>check one</i> ): <input type="checkbox"/> One time <input checked="" type="checkbox"/> Periodic <input type="checkbox"/> Regular						
<b>PRINT or TYPE</b> Company/Agency name Galileo Law, PLLC						
<b>Contract contact/manager (IVIPS and Bulk records accounts)</b> Anna Allard		<b>Signing Authority name (Bulk records accounts only)</b> Paul Veillon				
(Area code) Phone number (206) 257-6556	<b>Email (required for IVIPS and Bulk records)</b> anna@galileolaw.com	(Area code) Phone number (206) 257-6556	<b>Email (required for Bulk records)</b> paul@galileolaw.com			
Physical address of business ( <i>Number and street, City, State, ZIP code</i> ) 1218 3rd Ave Ste 1000, Seattle, WA 98191						
Mailing address of business, if different ( <i>Address or PO Box, City, State, ZIP code</i> ) Same as above						
Provide <b>one</b> of these identifiers:	Taxpayer Identification Number (TIN) <div style="background-color: black; color: white; padding: 2px;">6a</div>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)			
<b>2</b> Provide a detailed explanation of your primary business activity (exactly what your business does).  Plaintiff's Law Firm; representing not-at-fault plaintiffs pursue their personal injury &/or vehicle damage claims						
<b>3</b> Check all that apply to you and/or your business						
<table style="width: 100%; border: none;"> <tr> <td style="vertical-align: top; width: 33%;"> <input checked="" type="checkbox"/> Attorney  <input type="checkbox"/> Auction  <input type="checkbox"/> Auto manufacturer or agent  <input type="checkbox"/> Bail bonds  <input type="checkbox"/> Bank or financing firm  <input type="checkbox"/> Business  <input type="checkbox"/> Commercial parking company  <input type="checkbox"/> Credit union  <input type="checkbox"/> Data broker/Reseller  <input type="checkbox"/> Debt recovery/Collection  <input type="checkbox"/> Employer/Prospective employer  <input type="checkbox"/> Government  <input type="checkbox"/> Guardianship/Trustee service  <input type="checkbox"/> Homeowner association  <input type="checkbox"/> Hospital  <input type="checkbox"/> Hulk hauler  <input type="checkbox"/> Insurance company/agent           </td> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> Lien service  <input type="checkbox"/> Marina  <input type="checkbox"/> Neighborhood block watch  <input type="checkbox"/> Newspaper or media  <input type="checkbox"/> Non-profit organization  <input type="checkbox"/> Parking enforcement  <input type="checkbox"/> Private investigator  <input type="checkbox"/> Process server  <input type="checkbox"/> Property mgmt. - Government  <input type="checkbox"/> Property mgmt. - Private  <input type="checkbox"/> Repossession service  <input type="checkbox"/> Retail/Store  <input type="checkbox"/> School - Private  <input type="checkbox"/> School - Public  <input type="checkbox"/> Scrap processor or wrecker  <input type="checkbox"/> Security services - Government  <input type="checkbox"/> Security services - Private           </td> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> Service bureau for another business                Provide business name: _____   <input type="checkbox"/> Storage facility  <input type="checkbox"/> Title/Escrow  <input type="checkbox"/> Toll facility  <input type="checkbox"/> Towing company  <input type="checkbox"/> Transporter  <input type="checkbox"/> Union (non-profit)  <input type="checkbox"/> Vehicle/Vessel dealer  <input type="checkbox"/> I represent a business that will provide information to another party                Provide business names: _____   <input type="checkbox"/> Other (explain) _____                _____                _____           </td> </tr> </table>				<input checked="" type="checkbox"/> Attorney <input type="checkbox"/> Auction <input type="checkbox"/> Auto manufacturer or agent <input type="checkbox"/> Bail bonds <input type="checkbox"/> Bank or financing firm <input type="checkbox"/> Business <input type="checkbox"/> Commercial parking company <input type="checkbox"/> Credit union <input type="checkbox"/> Data broker/Reseller <input type="checkbox"/> Debt recovery/Collection <input type="checkbox"/> Employer/Prospective employer <input type="checkbox"/> Government <input type="checkbox"/> Guardianship/Trustee service <input type="checkbox"/> Homeowner association <input type="checkbox"/> Hospital <input type="checkbox"/> Hulk hauler <input type="checkbox"/> Insurance company/agent	<input type="checkbox"/> Lien service <input type="checkbox"/> Marina <input type="checkbox"/> Neighborhood block watch <input type="checkbox"/> Newspaper or media <input type="checkbox"/> Non-profit organization <input type="checkbox"/> Parking enforcement <input type="checkbox"/> Private investigator <input type="checkbox"/> Process server <input type="checkbox"/> Property mgmt. - Government <input type="checkbox"/> Property mgmt. - Private <input type="checkbox"/> Repossession service <input type="checkbox"/> Retail/Store <input type="checkbox"/> School - Private <input type="checkbox"/> School - Public <input type="checkbox"/> Scrap processor or wrecker <input type="checkbox"/> Security services - Government <input type="checkbox"/> Security services - Private	<input type="checkbox"/> Service bureau for another business Provide business name: _____  <input type="checkbox"/> Storage facility <input type="checkbox"/> Title/Escrow <input type="checkbox"/> Toll facility <input type="checkbox"/> Towing company <input type="checkbox"/> Transporter <input type="checkbox"/> Union (non-profit) <input type="checkbox"/> Vehicle/Vessel dealer <input type="checkbox"/> I represent a business that will provide information to another party Provide business names: _____  <input type="checkbox"/> Other (explain) _____ _____ _____
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**4** Explain in detail why you need vehicle/vessel information. Give examples. Attach additional pages if necessary.

Primarily for defendant investigation to facilitate settlement &/or Court proceedings for damages sustained in a motor-vehicle collision, as a pedestrian, a wrongful death, and any other situation where our client is not-at-fault but we are missing critical at-fault party information. Vehicle owners of the at-fault party are just as liable as the driver and this is a method as well as a legal requirement for our firm to identify all at-fault parties.

**5** Redisclosure and/or selling of information

Will you sell or provide the information to anyone else? ..... ☐ Sell ☒ Provide ☐ No

If no, skip to Section 6.

If yes, who will you provide or sell the information?

Relevant insurance companies, process servers, other attorneys involved in the claim including, but not limited to, private investigators, insurance adjusters and underwriters, defense attorneys, mediators, arbitrators, Judges, juries, Court clerks, et cetera.

The release and redisclosure of personal information is restricted by state and federal laws. How do you ensure recipients are entitled to personal information under these laws?

As an attorney, by following ethical rules set out by the WA State Bar Association, for which there are sanctions if information is abused or unethically used.

How will you provide the information to recipients? Explain.

Process server, US Mail, Court clerks, facsimile and email when an electronic agreement is in place.

**6** Owner contact

Will you contact the vehicle/vessel owner? ..... ☒ Yes ☐ No

*Unsolicited business contact for commercial purposes is strictly prohibited.*

If yes, why will you contact the owner and how will you contact them?

In most circumstances, we will not contact the vehicle owner; however on rare occasion we may send a letter via US Mail requesting the vehicle owner to provide their vehicle insurance coverage & related information.

**7** Answer the following

1. Do you agree not to sell or provide the information to any third party that has not been disclosed as part of this application? ..... ☒ Yes ☐ No
2. Do you agree not to use the information for any purpose other than reasons stated on this application? ..... ☒ Yes ☐ No
3. Do you agree not to use, or facilitate the use of, the information for the purpose of making unsolicited business contact, or promoting the sale of any goods or services? ..... ☒ Yes ☐ No

- ☐ **I represent a government agency.** Agency name: \_\_\_\_\_  
 Do you agree the information you receive will only be used in an official capacity and solely for carrying out the functions of your agency? ..... ☐ Yes ☐ No
- ☐ **I represent a Washington State business.** Attach legible copies of:
- your current business license
  - any/all professional licenses that you possess
- ☐ **I represent a business outside Washington State.** If your business is not required to be licensed in the state of Washington, attach a legible copy of either:
- your current business license
  - a letter with a signature of the owner or authorized representative indicating you are their agent. The letter must include your Employer Identification Number (EIN) or Taxpayer Identification Number (TIN).
- ☐ **I am a process server.** Attach legible copies of:
- your current business license
  - any/all professional licenses that you possess
  - registration for county jurisdictions
- ☐ **I represent a non-profit organization or corporation.**
1. Attach a legible copy of one of the following:
    - Your Articles of Incorporation, filed with the Secretary of State
    - Your Tax Exempt Status from the Internal Revenue Services (501)(c)(3)
    - Other documents reviewed and approved by the Department of Licensing Public Records Officer
  2. Submit a letter with a signature of the business owner or authorized representative indicating you are their agent.
- ☐ **I represent a data broker/reseller** – attach a legible copy of your current business license.  
 IVIPS applicants must also include:
- subscriber roster (provided on page 4)
  - subscriber agreements
- ☒ **I am an attorney.\*** Attach legible copies of:
- your current business license
  - your current bar card
- ☐ **I am a private investigator.\*** Attach legible copies of:
- your current Private Investigator license
  - your current business license

**\*Whenever an attorney or private investigator accesses a vehicle record in IVIPS, we will send a notification letter to the vehicle owner. RCW 46.12.635**

**Knowingly making a false statement or concealing a material fact required in this request or making false representation to obtain any personal information from an individual's motor vehicle record is subject to federal criminal fines under the DPPA and RCW 46.12.640**

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Attorney at Law

Title

04/28/2015

Date and place (county) signed

**X** Paul Veillon

Signature

Federal Driver Privacy Protection Act (DPPA) 18 U.S.C. §2721 through §2725  
 Washington State laws RCW 42.56, RCW 46.12, RCW 47, WAC 308-10, and WAC 308-93



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## Paul Michael Veillon

**WSBA Number:** 35031  
**Admit Date:** 06/11/2004  
**Member Status:** Active  
**Public/Mailing Address:** Galileo Law, PLLC  
 1218 3rd Ave Ste 1000  
 Seattle, WA 98101-3290  
 United States  
**Phone:** (206) 228-3629  
**Fax:** (206) 673-8247  
**TDD:**  
**Email:** [paul@galileolaw.com](mailto:paul@galileolaw.com)  
**Website:** <http://www.galileolaw.com>

### Practice Information

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**Firm or Employer:** Galileo Law, PLLC  
**Firm Size:** Solo in Shared Office or Suite  
**Practice Areas:** Personal Injury  
**Other Languages Spoken:** None Specified

### Liability Insurance

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**Private Practice:** Yes  
**Has Insurance?** Yes - [Click for more info](#)  
**Last Updated:** 01/21/2015

### Committees

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**Member of these committees/boards/panels:**  
 None

### Disciplinary History

No Public Disciplinary History

Only active members of the Washington State Bar Association, and others as authorized by law, may practice law in Washington.

The discipline search function may or may not reveal all disciplinary action relating to a lawyer. The discipline information accessed is a summary and not the official decision in the case. For more complete information, call 206-727-8207.

[Disclaimer +](#)

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STATE OF  
WASHINGTON

# BUSINESS LICENSE

Domestic Professional Limited Liability Company

Unified Business ID #: 603 476 314

Business ID #: 1

Location: 1

GALILEO LAW, PLLC  
GALILEO LAW PLLC  
1218 3RD AVE STE 1000  
SEATTLE WA 98101 3290

TAX REGISTRATION  
INDUSTRIAL INSURANCE  
UNEMPLOYMENT INSURANCE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:

GALILEO LAW FIRM  
GALILEO LAW GROUP  
GALILEO LAW PLLC  
GALILEO LEGAL  
LAW OFFICES OF PAUL VEILLON  
VEILLON LAW OFFICES

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Vikki Smith*

Director, Department of Revenue

STATE OF WASHINGTON  
EXPIRATION DATE

603 476 314 1 1

GALILEO LAW, PLLC  
GALILEO LAW PLLC  
1218 3RD AVE STE 1000  
SEATTLE WA 98101 3290

TAX REGISTRATION  
INDUSTRIAL INSURANCE  
UNEMPLOYMENT INSURANCE

FOLD HERE



FOLD HERE

*Vikki Smith*

Director, Department of Revenue

DETACH THIS SECTION FOR YOUR WALLET

# Redaction Log

Reason	Page (# of occurrences)	Description
6a	1 (1)	RCW 42.56.230(5); RCW 9.35.005. Personal Information – Financial Information. Credit card numbers, debit card numbers, electronic check numbers, card expiration dates, social security numbers, bank or other financial information identified in RCW 9.35.005. Information in RCW 9.35.005 is information identifiable to an individual that concerns the amount or conditions of an individual's assets, liabilities or credit: account numbers and balances; transactional information concerning an account; codes, passwords, social security numbers, tax identification numbers, driver's license or permit numbers, state identicard numbers issued by the Department of Licensing, and other information held for the purpose of account access or transaction initiation.